STATE OF SOUTH CAROLINA	
(0.4)	BEFORE THE
(Caption of Case)	PUBLIC SERVICE COMMISSION
Example: Application for a Class C Charter Certificate from John Doe dba Doe's Limo	OF SOUTH CAROLINA
	TRANSPORTATION COVER SHEET
Request to change name on Class C Taxi Certificate	
Geneva Holgula DBA Mr. P-Nota Taxi	DOCKET
)	NUMBER: 2003 - 341 - T
))	If this is your first time filing an application with the PSC, you will not have a Docket Number. The Commission will assign one to you. If you have filed with the Commission before, a Docket Number was assigned
(Planta Sina Amerika)	and should be entered above.
(Please type or print) Submitted by: Geneva Holguin	Drelephone: 843-821-3545
1.5- 1/0	
Address: 328 ININIAKEDE G	Prax: <u>843-851-5529</u>
Summourille SC 29483	Other:
	Email:
NOTE: The cover sheet and information contained herein neither replace	SS TOT SUMMERMOUS the filling and sender of plantings as other
as required by law. This form is required for use by the Public Service be filled out completely.	Commission of South Carolina for the purpose of docketing and must
NATURE OF ACTION	(Coeck all that apply)
Application - Class A/A Restricted	Request for Name Change on Certificate
Application - Class C Taxi	
Application - Class C Charter	Request to Amend Scope of Authority
	Request to Amend Tariff (rate increase, etc.)
Application - Class C Charter Bus	Request to Amend Passenger Limit
Application - Class C Non-Emergency	Request DECEIVET
Application - Class C Stretcher Van	☐ Exhibit
Application - Class E Household Goods	Late-Piled Exhibit JAN 3 7 2011
Application - Class E Hazardous Waste	— · · · · · · · · · · · · · · · · · · ·
Application	☐ Letter ☐ Proposed Order ☐ T, T, W, W/W
	
Request for Extension to Comply with Order	Publisher's Affidavit
Request for Order Granting Authority to Obtain a Certificate of Public Convenience and Necessity to be Rescinded	Publisher's Affidavit Reservation Letter ECEI JED
	Response 1 7011
Request for Cancellation of Certificate	The FEB UT 2
Request for Suspension	T ACCUMINATION TO SC SC
-	Other: MAIL DMS
Request for Reinstatement	Jan
Tyou have any questions about this form, please contact the	PUBLIC SERVICE COMMISSION at 803-896-5100.
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Page 2/3

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CLASS C AMENDMENT FORM

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file the original with:		Mail or fax a copy to:
Public Service Commission of South Card	otion	· [
Clerk's Office	DIINA	S.C. Office of Regulatory Staff
Motor Carrier Matters		Transportation Department 1401 Main Street, Suite 900
P.O. Box 11649		Columbia, S.C. 29201
Columbia, S.C. 29211		(803) 737-0578
(803) \$96 - 5100		FAX (803) 737-0815
FAX (803) 896-5199		
		RECEIVET
(*)DATE: 11/19/10		
DATE. TITTO	•	JAN 3 1 2011
I have the following Continues		UAN 3.1 ZUII
I have the following Certificate:		ORS
Class C Toxist FILID-A Class on		T, T, W, W/W
Class C Taxi # 7416-A Class C	Charter#	Class C Charter Bus #
Class C Non-Emergency#		
Oldoo O Noth Ethicigonicy #		
Please consider this as my request for the	following	n manualmana/a\ la a a
— I read the first the first to	CONTANTIE	amendment(s) to my Certificate:
Name Change		
The state of the s		
From: Geneva Holquin	D	BA: Mr. P-Nuts Taxi
<u> </u>	W	DA. 110 , 1 -17023 1424
(Current Name)		(Current DBA if applicable)
TO: Chairteaher Halanda		
TO: Christopher Holguin (New Name)	D8/	A: Mr. P-Nuts Taxi
(MEM NEM)		(New DBA if applicable)
Saama of Austrauta		(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Scope of Authority		
From: State of S.C.	T/	o: Same
(Current Donne)		
(Current Scope)		(New Scope)
Pessenger Limit		• •
· · · · · · · · · · · · · · · · · · ·		
From:5	To	n: 5
(Current Limit Number)		
(Oditent Finit (ADDIDE))		(New Limit Number)
^		
Genab Holquin DRA MR P-Nu	.ts ((x) same
(Name & DBA if applicable) Ta	yki `	(Street and/or Mailing Address)
50 015 m 1 1 1/2 m 1		· • · · · · · · · · · · · · · · · · · ·
(8) 328 TWIN LOKES Dr Summen	אול ד	on Hanny Od lawas
(City, State, Zip Code)		A ASOLUTION DI MONGLUZ
SC 29483		(Signature)
R 843-821-3545		6
	(DUNCC
(Telephone Number)		(Title) Owner, President, etc.
		The state of the s
		Dauland & A
		Revised 2-24-10
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Page 3/3

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